

497 Contribution Report

Amounts may be rounded to whole dollars.

11/3/22 Email

RECEIVED BY

497 CONTRIBUTION REPORT

NAME OF FILER BUELNA FOR COLLEGE BOARD 2022			Date of This Filing 11/03/2022 Report No. 110322-1 <input type="checkbox"/> Amendment to Report No. _____ (explain below) No. of Pages 1	RECEIVED BY LOS ANGELES COUNTY 2022 NOV -4 AM 10:35 CAMPAIGN FINANCE DISCLOSURE SECTION	CALIFORNIA FORM 497 For Official Use Only	
AREA CODE/PHONE NUMBER (213) 489-4792	I.D. NUMBER (if applicable) 1392470					
STREET ADDRESS _____ _____						
CITY Norwalk	STATE CA	ZIP CODE 90650				

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
11/03/2022	Coalition for L. A. Community College Reform to Support Veres, Iino, Hernandez & Buelna, Sponsored by LACC Faculty Guild 1521 Los Angeles, CA 90017 Committee ID # 1315215 (in-kind) Texting Program Costs	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		5,611.29 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan _____% Provide interest rate

*Contributor Codes
 IND - Individual
 COM - Recipient Committee (other than PTY or SCC)
 OTH - Other (e.g., business entity)
 PTY - Political Party
 SCC - Small Contributor Committee

Reason for Amendment: _____